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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) McGovern, Kevin, John, ,		2. Candidate's FEC Identification Number H2FL07206	
(b) Address (number and street) 110 E. Reynolds Street 603		<input type="checkbox"/> Check if address changed	
(c) City, State, and ZIP Code Plant City FL 33563		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)	
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate FL 15	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) MCGOVERN FOR FLORIDA	
(b) Address (number and street) 911 BEGONIA RD 301	
(c) City, State, and ZIP Code CELEBRATION FL 34747	

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)
(b) Address (number and street)
(c) City, State, and ZIP Code

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate McGovern, Kevin, J, , [Electronically Filed]	Date 06/02/2022
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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